



OFFSITE INSPECTION & TESTING
333 NORTH RANCHO DRIVE
LAS VEGAS, NV 89106
PHONE: (702) 229-6337
FAX: (702) 631-3000

CITY OF LAS VEGAS

BUILDING AND SAFETY DEPARTMENT

ELECTRICAL CONTRACTOR'S REQUEST FOR INSPECTION

STREETLIGHT / TRAFFIC SIGNAL

AS-BUILTS or REDLINED PLANS ARE REQUIRED FOR SUBMISSION

- **FULLY AND ACCURATELY COMPLETE & SUBMIT TO COUNTER #15 AT THE DEVELOPMENT SERVICES CENTER**
- **AS-BUILT DRAWINGS (2 COPIES) SHALL BE SIGNED BY THE CONTRACTOR AND SUBMITTED WITH THE INSPECTION REQUEST**
- **ALL REQUESTS FOR RE-INSPECTION MUST INCLUDE A COPY OF THE ORIGINAL PUNCHLIST AND CORRECTIONS PERFORMED**

COMPANY NAME: _____ SUPERVISOR NAME: _____

OFFICE: _____ MOBILE: _____ FAX: _____

DEVELOPER: _____ REP'S NAME: _____

OFFICE: _____ MOBILE: _____ FAX: _____

PROJECT NAME: _____ UNIT / PHASE: _____

PROJECT LOCATION: _____

CLV DWG #: _____ CLV PERMIT #: _____

STREET LIGHT INSPECTION

- **THIS SECTION MUST BE COMPLETED WHEN REQUESTING INSPECTION OF STREETLIGHTING SYSTEMS & COMPONENTS**

DATE OF REQUEST: _____ LOCATION: _____

CONTRACTOR'S SIGNATURE: _____ DATE: _____

2ND INSP. CONTRACTOR'S SIG: _____ DATE: _____ INSP. INITIALS: _____ DATE: _____

3RD INSP. CONTRACTOR'S SIG: _____ DATE: _____ INSP. INITIALS: _____ DATE: _____

TRAFFIC SIGNAL INSPECTION

- **THIS SECTION MUST BE COMPLETED WHEN REQUESTING INSPECTION OF TRAFFIC SIGNAL SYSTEMS & COMPONENTS**

DATE OF REQUEST: _____ LOCATION: _____

CONTRACTOR'S SIGNATURE: _____ DATE: _____

2ND INSP. CONTRACTOR'S SIG: _____ DATE: _____ INSP. INITIALS: _____ DATE: _____

3RD INSP. CONTRACTOR'S SIG: _____ DATE: _____ INSP. INITIALS: _____ DATE: _____

DO NOT WRITE BELOW THIS LINE – CITY OF LAS VEGAS USE ONLY

INSPECTOR NAME: _____ DATE RECEIVED: _____

INSPECTOR CELL PHONE NUMBER: _____ RECEIVED BY: _____